



## BRP WM 04

### Instructions and Supporting Materials

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#### Table of Contents

- introduction
- permit fact sheet
- completeness checklist
- DEP addresses and phone numbers
- application forms

#### Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at [mass.gov/dep](http://mass.gov/dep) in two file formats: Microsoft Word and Adobe Acrobat PDF. Either format allows documents to be printed.

*Instructions & Support Materials* files in Microsoft Word format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

*Permit Applications* in Microsoft Word format must be downloaded separately. Users with Microsoft Word 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



## BRP WM 04 Permit Fact Sheet

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### 1. What is the purpose of this permit?

This license serves two major functions. First, it provides a review of chemical applications to aquatic systems (traditionally lakes and ponds) to ensure that they are being implemented utilizing currently acceptable procedures and materials, in order to maintain environmental and public health to the maximum extent possible under the circumstances. Second, it provides a means for keeping records, for future reference, of chemicals that have been introduced into specific areas.

This license grants approval to apply chemicals for the control of nuisance aquatic vegetation in accordance with authority granted to the Department of Environmental Protection by Massachusetts General Laws c. 111, s. 5E.

**Note:** This permit is now administered by the Office of Watershed Management, not the Division of Water Pollution Control. As a result, the permit code number has changed, effective November 30, 1994, but all other aspects of these permits remain the same. BRP WM 04 was formerly BRP WP 38.

### 2. Who must apply?

Anyone wishing to apply chemicals to bodies of water **except** under the following conditions:

a. When treatment is undertaken by employees and agents of the Departments of Environmental Protection, Environmental Management, and Fisheries, Wildlife and Environmental Law Enforcement, or of the Reclamation Board, or of related Federal agencies, while in the conduct of their official duties;

OR

b. When treatment is undertaken with algicide approved by DEP and used by legally established water supply agencies to control taste and odors;

OR

c. When treatment is undertaken in privately owned (single owner) ponds from which there are no flowing outlets.

### 3. What other requirements should be considered when applying for this permit?

#### a. What prerequisites should be considered before applying for this permit?

- Chemical treatments must be performed by an applicator currently licensed (in the aquatic weed category) by the Massachusetts Department of Food and Agriculture Pesticide Bureau.
- Chemicals used for treatments must be currently approved for use in the state by the Pesticide Bureau.



## BRP WM 04 Permit Fact Sheet

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- A final Order of Conditions or a Negative Determination of Applicability (Wetlands Protection Act) must be obtained prior to the treatment.

**b. What concurrent applications are related to this permit?**

- Since chemical treatments constitute the alteration of wetland resources, a Notice of Intent must be filed in accordance with the Wetlands Protection Act (MGL c. 131, s. 40) and Wetlands Protection Regulations (310 CMR 10.00).

**Note:** These additional requirements are intended to serve as a guide to the applicant. It does not necessarily include **all** additional requirements.

**4. What is the application fee?**

The application fee is \$60.

**5. What is the Primary Permit Location? What is the Reserve Copy Location?**

***Primary Permit Location:***

Department of Environmental Protection  
Office of Watershed Management  
One Winter Street  
8th Floor  
Boston, MA 02108

***Reserve Copy Location:***

Not Required.

**6. What are the timelines?**

As of July 1, 1992 the timelines are:

	AC	T1	T2
BRP WM 04	30	30	30

\*(A second technical review will only be conducted if necessary).

*There is no public comment review period for this permit.*

**7. What is the annual compliance fee?**

There is no annual compliance fee for this permit.

**8. How long is this permit in effect?**

The license is in effect for nine months from the date of issuance.



## BRP WM 04 Permit Fact Sheet

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### 9. How can I avoid the most common mistakes made in applying for this permit?

- a. Be sure to include the **current** Pesticide Bureau License Number for the Applicator.
- b. Be sure that a Notice of Intent (Wetlands Protection Act) has been filed with the local Conservation Commission and that arrangements have been made to forward a copy of either the Order of Conditions or Negative Determination of Applicability to the Office of Watershed Management (see address above).
- c. Be sure that an accurate, good quality map, which designates treatment areas, is attached to the application.
- d. Submit fee and **yellow** page of the DEP Transmittal Form to: Department of Environmental Protection, P. O. Box 4062, Boston, MA 02211.

### 10. What are the regulations that apply to this permit? Where can I get copies?

These regulations include, but are not limited to:

- a. Wetlands Regulations, 310 CMR 10.00.
- b. Timely Action Schedule and Fee Provisions, 310 CMR 4.00.

These may be purchased at:

State Bookstore (in State House)  
Room 116  
Boston, MA 02133  
617-727-2834

State Bookstore  
436 Dwight Street  
Springfield, MA 01103  
413-784-1376



## BRP WM 04 Application Completeness Check List

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- ☐ The DEP Transmittal Form is completed.
- ☐ The application form has been filled out. All questions have been completed.
- ☐ An accurate, good quality map, which indicates treatment areas, is attached to the application.
- ☐ A Notice of Intent (Wetlands Protection Act) has been filed with the local Conservation Commission and arrangements have been made to forward a copy of the Order of Conditions or Negative Determination of Applicability to the Office of Watershed Management, One Winter Street, 8th Floor, Boston, MA 02108.

To submit the application package:

- ☐ Checklist items have been completed.
- ☐ Send a copy of the application package along with the *one* page from the DEP Transmittal Form to:

Department of Environmental Protection  
Watershed Management  
1 Winter Street  
8th Floor  
Boston, MA 02108

- ☐ Send fee of \$60 in the form of check or money order made payable to *Commonwealth of Massachusetts*, along with the *one* page from the DEP Transmittal Form to:

Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211



## Massachusetts Department of Environmental Protection

# Addresses and Phone Numbers

DEP Boston  
One Winter Street  
Boston, MA 02108  
Telephone: (617) 292-5500  
Fax: (617) 556-1049  
TDD: (617) 574-6868

William X. Wall Experiment Station  
37 Shattuck Street  
Lawrence, MA 01843  
Fax: (978) 688-0352  
*Division of Environmental Analysis*  
Telephone: (978) 682-5237  
*Air Quality Surveillance*  
Telephone: (978) 975-1138

Office of Watershed  
Management  
627 Main Street  
Worcester, MA 01608  
Telephone: (508) 792-7470  
Fax: (508) 839-3469

Millbury Training Center  
Route 20 Millbury, MA 01527  
Telephone: (508) 368-5600  
Fax: (508) 755-9253  
*Residuals Sludge Management*  
Telephone: (508) 368-5606  
*WWT Operator Certification*  
Telephone: (508) 368-5698

DEP Western Region  
436 Dwight Street  
Suite 402  
Springfield, MA 01103  
Phone: (413) 784-1100  
Fax: (413) 784-1149



Adams  
Agawam  
Alford  
Amherst  
Ashfield  
Becket  
Belchertown  
Bernardston  
Blandford  
Brimfield  
Buckland  
Charlemont  
Cheshire  
Chester  
Chesterfield  
Chicopee  
Clarksburg

Colrain  
Conway  
Cummington  
Dalton  
Deerfield  
Easthampton  
East Longmeadow  
Egremont  
Erving  
Florida  
Gill  
Goshen  
Granby  
Granville  
Great Barrington  
Greenfield  
Hadley

Hampden  
Hancock  
Hatfield  
Hawley  
Heath  
Hinsdale  
Holland  
Holyoke  
Huntington  
Lanesborough  
Lee  
Lenox  
Leverett  
Leyden  
Longmeadow  
Ludlow  
Middlefield

Monroe  
Montague  
Monterey  
Montgomery  
Monson  
Mount Washington  
New Ashford  
New Marlborough  
New Salem  
North Adams  
Northampton  
Northfield  
Orange  
Otis  
Palmer  
Pelham  
Peru

Pittsfield  
Plainfield  
Richmond  
Rowe  
Russell  
Sandisfield  
Savoy  
Sheffield  
Shelburne  
Shutesbury  
Southampton  
South Hadley  
Southwick  
Springfield  
Stockbridge  
Sunderland  
Tolland

Tyringham  
Wales  
Ware  
Warwick  
Washington  
Wendell  
Westfield  
Westhampton  
West Springfield  
West Stockbridge  
Whately  
Wilbraham  
Williamsburg  
Williamstown  
Windsor  
Worthington

DEP Central Region  
627 Main Street  
Worcester, MA 01608  
Phone: (508) 792-7650  
Fax: (508) 792-7621  
TDD: (508) 767-2788



Acton  
Ashburnham  
Ashby  
Athol  
Auburn  
Ayer  
Barre  
Bellingham  
Berlin  
Blackstone  
Bolton  
Boxborough  
Boylston  
Brookfield

Charlton  
Clinton  
Douglas  
Dudley  
Dunstable  
East Brookfield  
Fitchburg  
Gardner  
Grafton  
Groton  
Harvard  
Hardwick  
Holden  
Hopedale

Hopkinton  
Hubbardston  
Hudson  
Holliston  
Lancaster  
Leicester  
Leominster  
Littleton  
Lunenburg  
Marlborough  
Maynard  
Medway  
Mendon  
Milford

Millbury  
Millville  
New Braintree  
Northborough  
Northbridge  
North Brookfield  
Oakham  
Oxford  
Paxton  
Pepperell  
Petersham  
Phillipston  
Princeton  
Royalston

Rutland  
Shirley  
Shrewsbury  
Southborough  
Southbridge  
Spencer  
Sterling  
Stow  
Sturbridge  
Sutton  
Templeton  
Townsend  
Tyngsborough  
Upton

Uxbridge  
Warren  
Webster  
Westborough  
West Boylston  
West Brookfield  
Westford  
Westminster  
Winchendon  
Worcester

DEP Southeast Region  
20 Riverside Drive  
Lakeville, MA 02347  
Phone: (508) 946-2700  
Fax: (508) 947-6557  
TDD: (508) 946-2795



Abington  
Acushnet  
Attleboro  
Avon  
Barnstable  
Berkley  
Bourne  
Brewster  
Bridgewater  
Brockton  
Carver  
Chatham  
Chilmark

Dartmouth  
Dennis  
Dighton  
Duxbury  
Eastham  
East Bridgewater  
Easton  
Edgartown  
Fairhaven  
Fall River  
Falmouth  
Foxborough  
Franklin

Freetown  
Gay Head  
Gosnold  
Halifax  
Hanover  
Hanson  
Harwich  
Kingston  
Lakeville  
Mansfield  
Marion  
Marshfield  
Mashpee

Mattapoisett  
Middleborough  
Nantucket  
New Bedford  
North Attleborough  
Norton  
Norwell  
Oak Bluffs  
Orleans  
Pembroke  
Plainville  
Plymouth  
Plympton

Provincetown  
Raynham  
Rehoboth  
Rochester  
Rockland  
Sandwich  
Scituate  
Seekonk  
Sharon  
Somerset  
Stoughton  
Swansea  
Taunton

Tisbury  
Truro  
Wareham  
Wellfleet  
West Bridgewater  
Westport  
West Tisbury  
Whitman  
Wrentham  
Yarmouth

DEP Northeast Region  
205 Lowell Street  
Wilmington, MA 01887  
Phone: (978) 661-7600  
Fax: (978) 661-7615  
TDD: (978) 661-7679



Amesbury  
Andover  
Arlington  
Ashland  
Bedford  
Belmont  
Beverly  
Billerica  
Boston  
Boxford  
Braintree  
Brookline  
Burlington  
Cambridge  
Canton  
Carlisle

Chelmsford  
Chelsea  
Cohasset  
Concord  
Danvers  
Dedham  
Dover  
Dracut  
Essex  
Everett  
Framingham  
Georgetown  
Gloucester  
Groveland  
Hamilton  
Haverhill

Hingham  
Holbrook  
Hull  
Ipswich  
Lawrence  
Lexington  
Lincoln  
Lowell  
Lynn  
Lynnfield  
Malden  
Manchester-By-The-Sea  
Marblehead  
Medfield  
Medford  
Melrose

Merrimac  
Methuen  
Middleton  
Millis  
Milton  
Nahant  
Natick  
Needham  
Newbury  
Newburyport  
Newton  
Norfolk  
North Andover  
North Reading  
Norwood  
Peabody

Quincy  
Randolph  
Reading  
Revere  
Rockport  
Rowley  
Salem  
Salisbury  
Saugus  
Sherborn  
Somerville  
Stoneham  
Sudbury  
Swampscott  
Tewksbury  
Topsfield

Wakefield  
Walpole  
Waltham  
Watertown  
Wayland  
Wellesley  
Wenham  
West Newbury  
Weston  
Westwood  
Weymouth  
Wilmington  
Winchester  
Winthrop  
Woburn



# BRP WM 04

## Application to Apply Herbicides(s) to the Waters of the Commonwealth

Transmittal Number \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

### A. Instructions

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Pursuant to the authority granted to the Department of Environmental Protection, by Massachusetts G.L.c. 111, s5E, a license is required for application of chemicals to water bodies for the control of nuisance aquatic vegetation, except under the following conditions:

1. When treatment is undertaken by employees and agents of the Department's of Environmental Protection, Environmental Management, and Fisheries, Wildlife and Environmental Law Enforcement or the state Reclamation Board or of related Federal agencies, while in the conduct of their official duties; or
2. when treatment is undertaken with algicides approved by the Department and used by legally established water supply agencies to control taste and odors; and

3. when treatment is undertaken in privately owned (single owner) ponds from which there are no flowing outlets. Although a license is not required under the aforementioned conditions, any state or municipal agency or private person planning an herbicide application to a water body exempt from this license requirement is requested to inform the Department by letter of such treatment for the purpose of record keeping.

This license application to chemically treat waters for control of nuisance aquatic vegetation must be completed and submitted to the Office of Watershed Management, One Winter Street, 8th floor, Boston, MA 02108, at least 30 days prior to the proposed date(s) of treatment.

### B. Applicant Information

1. Licensed Applicator:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
State

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Pesticide Bureau License Number

2. Representing Project Proponent:

\_\_\_\_\_  
(e.g. town, lake association, or private party)

\_\_\_\_\_  
Telephone Number

3. Date submitted:

\_\_\_\_\_

4. Proposed date(s) of treatment:

\_\_\_\_\_



## BRP WM 04

### Application to Apply Herbicides(s) to the Waters of the Commonwealth

Transmittal Number \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

#### C. Waterbody Information

1. Name of waterbody: \_\_\_\_\_
2. Location of waterbody: \_\_\_\_\_  
(city/town)
3. Area of waterbody: \_\_\_\_\_  
(acres)
4. Depth: \_\_\_\_\_  
Maximum depth \_\_\_\_\_  
Mean depth \_\_\_\_\_
5. Description of ownership of waterbody (check one):  
☐ Great Pond    ☐ Great Pond enhanced by flowage    ☐ Private Pond (with flowing outlet)  
☐ Other (please describe) \_\_\_\_\_

#### D. Treatment

Extent of proposed treatment (Check One) and provide acreage to be treated:

- |  |        |
|--|--------|
| <input type="checkbox"/> Entire water body | _____  |
|  | Acres: |
| <input type="checkbox"/> Entire shoreline  | _____  |
|  | Acres: |
| <input type="checkbox"/> Partial treatment | _____  |
|  | Acres: |

#### F. Mapping Information

A map of the waterbody must be submitted with this application. This map should be of good quality and must contain the following information:

- a. Relative abundance and species composition of vegetation in the pre-treatment area.
- b. If partial treatment is proposed, the map must clearly show the areas to be treated.
- c. Location of all public and private bathing beaches.
- d. Name and location of any public and/or private water supply wells or intakes within 400 feet of the shoreline.
- e. Location of all inlet and outlet streams.
- f. Location of any livestock watering or access areas.
- g. If separate areas of the waterbody are to be treated with different chemicals, then this information must be clearly indicated.





## BRP WM 04

Application to Apply Herbicides(s) to the Waters of the  
Commonwealth

Transmittal Number \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

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### G. Water Use

1. Is the water from the lake or pond used for:

- |                       |                              |                             |
|-----------------------|------------------------------|-----------------------------|
| Private Water Supply? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Watering Livestock?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Contact Recreation?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Irrigation?           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Public Water Supply?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Cooling Water?        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

2. Describe any uses made of the lake or pond water within 400 feet of the shoreline or within one mile of the outlet. Make special note of any public water supply wells or intakes:

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### H. Vegetation

List the vegetation to be controlled in descending order of abundance (genus name of macrophyton and/or major phytoplankton groups):

a. _____	b. _____
c. _____	d. _____
e. _____	f. _____
g. _____	h. _____



## BRP WM 04

### Application to Apply Herbicides(s) to the Waters of the Commonwealth

Transmittal Number \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

#### I. Chemical Information

1. List chemicals:	1.	2.	3.	4.
Chemical Names(s) (trade name)	_____	_____	_____	_____
Chemical Form (dry/liquid)	_____	_____	_____	_____
Total Weight/Volume Applied (lbs/gallons)	_____	_____	_____	_____
Acres Treated (for each chemical)	_____	_____	_____	_____
Application Rate (lbs or gal/acres)	_____	_____	_____	_____
Planned Maximum Concentration (ppm)	_____	_____	_____	_____

2. Briefly describe treatment method including any additional information on chemicals applied or remarks concerning this particular treatment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## BRP WM 04

### Application to Apply Herbicides(s) to the Waters of the Commonwealth

Transmittal Number \_\_\_\_\_

Facility ID (if known) \_\_\_\_\_

#### J. Additional Information

The applicant is hereby advised of the following:

- a. Within fourteen days of the date of treatment authorized in this license, the licensee is required to submit a written response to the Department certifying the treatment date, application rate, and the total weight/volume for each chemical used in the treatment.
- b. The licensee shall not apply chemicals in a manner contrary to, or inconsistent with, the application conditions set forth in Section I A. in the license without the prior written approval of the Department.
- c. The applicant is hereby notified that chemical treatments to control aquatic nuisances in public or private lakes and ponds of the Commonwealth involve the alteration of wetland resource areas protected under MG.L. c. 131, s. 40, the Wetlands Protection Act, and 310 CMR 10.00, Massachusetts Wetlands Protection Regulations.
- d. A final Order of Conditions or a Negative Determination of Applicability must be obtained from the local Conservation Commission prior to application of chemicals under any license issued by the Department.
- e. Shoreline areas of the lake must be posted with signs warning the general public of any water use restrictions stated on the chemical label for a minimum of one week. This is especially important at bathing beaches and other areas of common access. These signs shall clearly state that the chemical treatment is being conducted pursuant to a license issued by the Department of Environmental Protection.
- f. The Department may require the licensee to cease application of chemicals to a body of water at any time following the issuance of a license if the Department determines that chemical treatment will be ineffective, or will result in unreasonable restrictions on current water uses, or will produce unnecessary adverse side effects on nontarget vegetation.
- g. Chemical applications shall be performed in accordance with the manufacturers label directions, existing pesticide use laws, and any conditions imposed by local or state agencies.
- h. Chemical treatments shall only be performed by an applicator currently licensed by the Massachusetts Department of Food and Agriculture Pesticide Bureau in the aquatic weed category.
- i. Issuance of a license does not release the licensee from liability resulting from the use of chemicals or from negligent or reckless application of chemicals specified in this application.

#### K. Certification

The applicant hereby certifies the truth of the above statements and agrees to accept the following conditions as a prerequisite to the issuance of a license: that the issuance of the license is based on the accuracy of all statements presented by the applicant; that damage resulting from the inaccuracy of any computations, improper application of the chemical(s), or legal responsibility for the representations made in obtaining required approvals or releases, or failure to obtain said approvals or releases is the sole responsibility of the applicant.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date